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## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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34283 7590 07/27/2004

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Nelson A. Quintero (Depositor's name)  
(Signature)  
08/13/2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/802,552	03/17/2004	Meng-Hung Chen	10113931	3716

TITLE OF INVENTION: METHOD FOR FORMING A CONTACT OPENING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	10/27/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
GURLEY, LYNNE ANN	2812	438-256000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Nanaya Technology Corporation

Taoyuan, TW

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ Individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
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- ☐ A check in the amount of the fee(s) is enclosed.  
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 502447 (enclose an extra copy of this form).

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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(Authorized Signature)

(Date)

#52,143

08/13/2004

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTOL-85 (Rev. 07/04) Approved for use through 04/30/2007.

OMB 0651-0033

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PAGE 2/3 \* RCVD AT 8/13/2004 2:50:36 PM [Eastern Daylight Time] \* SVR:USPTO-EFXXRF-2/3 \* DNIS:7464000 \* CSID:13104016185 \* DURATION (mm-ss):02:30



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Attorney Docket No. 10113931

**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: **Meng-Hung CHEN**

Filed: **3/17/2004**

Appl. No.: **10/802,552**

Examiner: **Gurley, Lynne Ann**

Conf. No.: **3716**

Art Unit: **2812**

Title: **METHOD FOR FORMING A CONTACT OPENING**

Date: **August 13, 2004**

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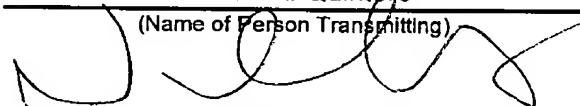
**FEE(S) TRANSMITTAL**

Enclosed please find the fee(s) transmittal form (in duplicate) authorizing the Commissioner to charge the issue fee and publication fee (if required) for the above referenced application to Deposit Account Number 502447.

**Certificate of Transmission**

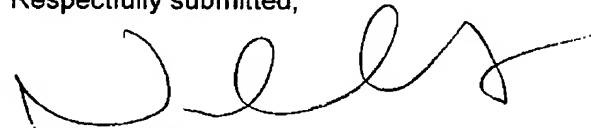
I hereby certify that this correspondence is being facsimile transmitted to the USPTO at (703) 746-4000 on the date shown below:

Nelson A. Quintero  
(Name of Person Transmitting)

  
(Signature)

August 13, 2004  
(Date)

Respectfully submitted,



Nelson A. Quintero  
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Telephone: (310) 401-6180

P106503NAQ